F16000004789

(Req	uestor's Name)				
(Add	ress)				
(Add	ress)				
(City)	/State/Zip/Phon	ne #)			
PICK-UP	☐ WAIT	MAIL			
(Busi	iness Entity Na	me)			
(Document Number)					
Certified Copies	Certificate	s of Status			
Special Instructions to Filing Officer:					
W16-	6840C				





000290791340

10/03/16--01012--011 **70.00

SECRETARY OF STATE SECRETARY OF STATE

D. SCOTT **0CT** 2 6 2016



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 5, 2016

CLAUDIO PAIROT 250 NE 25TH ST SUITE 308 MIAMI, FL 33137

SUBJECT: PUNTILLA CO. Ref. Number: W16000068400

RECEIVES

We have received your document for PUNTILLA CO. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company, "Corporation," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

THE ALTERNATE NAME YOU'VE CHOSEN IS THE SAME NAME AS THE ORIGINAL NAME ON LINE ONE OF APPLICATION.,

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 816A0002147

ECRETARY OF STATE

COVER LETTER

то:	Registration Sec Division of Cor						
CIID	Puntilla Ir	-					
SUB	JEC1	Name of	`corporati	on - 1	nust include suffix		
Dear :	Sir or Madam:						
"Certi	ificate of Existence		f Good S	tandi	nthorization to Transa ng" and check are sub in Florida.		
	e return all corresp lio Pairot	ondence concernin	g this mat	ter to	the following:		
			Name	of Pe	rson		
Puntil	la Inc.						
250 N	TE 25th St Suite 308		Firm/Co	ompa	ny		
Miam	i FL 33137		Ad	dress			
			City/State	and	Zip code	- 1	
claudi	iopairot@gmail.com						
		E-mail address:	(to be use	d for	future annual report	notification)	۱۰. مست
For fu	orther information	concerning this ma	tter, pleas	e call	:		AEC SEC
Claud	lio Pairot	а	786 t ()	7179448		超 2
	Name of Person	1	Area C	ode	Daytime Telep	hone Number	SEE PL
Finala	Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	porations 3 Center Circle 32301			MAILING A Registration S Division of Co P.O. Box 632' Tallahassee, F	Section orporations 7	TATE ORIDA
	0.00 Filing Fee	the following amou \$78.75 Filing Certificate of	Fee &		78.75 Filing Fee & Certified Copy	\$87.50 I Certific Certifie	ate of Status &

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	orporation; must include "INCORPORATE orp," "Inc," "Co," or "Corp.")	ED," "COMPANY," "CORPORATIO	N,"
Puntilla Product	ions Co.		
(If name unavaila	able in Florida, enter alternate corporate na	ame adopted for the purpose of transacti	ng business in Florida)
Delaware			
09/01/2016	y under the law of which it is incorporated	•	
(Date of incorporation)		5. (Date of duration, if othe	r than perpetual)
·	• ,		,
250 NE 25th St, I		incipal office address)	· · · · · · · · · · · · · · · · · · ·
	(Fi	mcipai office address)	
	(Current m	nailing address, if different)	
Name and stree	et address of Florida registered agent: Claudio Pairot	(P.O. Box <u>NOT</u> acceptable)	FILED FILED FALLAHASSEE, FI
fice Address:	250 NE 25th St		E P
	Miami	33137 , Florida	1: 55 LOND
	(City)	(Zip code)	₩ O/
aving been nam esignated in this orther agree to c	ent's acceptance: ed as registered agent and to accept s application, I hereby accept the appo omply with the provisions of all status amiliar with and accept the obligation	pintment as registered agent and ag tes relative to the proper and comp	ree to act in this capacity lete performance of my
	O	·	

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors: A. DIRECTORS Claudio Pairot Chairman: 250 NE 25th St, Miami FL 33137 Address: Vice Chairman: Address: _ Director: Address: _ Director: Address: ____ **B. OFFICERS** Claudio Pairot President: 250 NE 25th St, Miami FL 33137 Address: Vice President: Address: _ Claudio Pairot Secretary: 250 NE 25th St, Miami FL 33137 Address: Claudio Pairot Treasurer: 250 NE 25th St, Miami FL 33137 Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. 12. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Claudio Pairot - President (Typed or printed name and capacity of person signing application)

<u>Delaware</u>

Page 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PUNTILLA INC." IS DULY INCORPORATED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF SEPTEMBER, A.D. 2016.





Authentication: 203028390

Date: 09-21-16

6139388 8300 SR# 20165851234